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BRIXWORTH RURAL  
DISTRICT COUNCIL

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ANNUAL  
REPORT

OF THE

MEDICAL OFFICER  
OF HEALTH

FOR THE

YEAR 1961

JOAN M. ST. V. DAWKINS  
M.B., B.S., D.P.H., D.C.H.



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Telephone:  
Brixworth 291.

Council Offices,  
Brixworth,  
Northampton.

TO THE CHAIRMAN AND MEMBERS OF THE  
BRIXWORTH RURAL DISTRICT COUNCIL.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my sixth Annual Report as Medical Officer of Health, incorporating that of the Public Health Inspector.

Each year the Medical Officer has this opportunity to present an assessment of the health of the District. The Community environment shows steady improvement. With the advances of modern science, and the provisions of the Welfare State so should the physical and mental health of the individual. Indeed life compared with that of a hundred or even fifty years ago would appear Utopian, yet to those whose task is prevention there remain many challenges.

A healthy Community is also disciplined, productive, with compassion for the weak and showing a mental and spiritual advancement along with the achievement of abundant physical health, thus bringing to full fruition all its potentialities. The very prosperity of our present society would appear to be creating its own problems, and the health of the person and in some instances of the environment may become dependent on individual wisdom and discipline. The environment may be needlessly destroyed or disrupted by the violence of crime. In the case of individuals I give some examples of where this might apply. We have healthy children suffering from early and severe dental decay, and increasingly from obesity due to over indulgence in carbo-hydrate foods and sweets. The highway continues to take its indiscriminate toll of young and old alike, a bewildering problem to resolve. The early incidence of arterial disease resulting in deaths from coronary thrombosis, often in the more responsible men in their prime, due perhaps in part to sedentary life, faulty diet, stress and smoking. The relationship of the ever increasing number of cases of cancer of the lung to heavy cigarette smoking is unimpeachable. The high rate of deaths from accidents in the home, especially among the young and the aged, nearly all of which could have been prevented with a little forethought, is most distressing. Finally the incidence of mental ill-health is still far too high.



It is also sad to reflect that where free immunisation is offered to all for certain diseases that many individuals do not bother to seek out protection either for themselves or their children.

There do remain, however, a number of diseases whose genesis remains still obscure. Among these are the respiratory infections, including bronchitis, the rheumatic diseases, cancers, diabetes, many suffering needlessly through late diagnosis, and some mental and nervous diseases. We must hope for advances in these fields.

The vital statistics for the year 1961 show that there were 229 deaths, the same as last year. This gives a standardised rate of 9.5 compared with the national figure of 12. Female deaths exceeded male deaths by 61. Details and comments on the causes of death are on pages 10 and 11.

The total number of births was 274 showing a decrease of 36 on last years figure of 310, of which 13 were illegitimate, two more than last year. There were 4 infant deaths compared with 2 last year, of which 2 were under one week of age. The infant death rate has risen to 14.59 from 9.68 last year, and is well below the national figure of 21.4.

There was an increase in infectious disease notifications, rising from 61 to 453 due to the biennial incidence of measles. Notifications rose from 13 to 432 cases. There was once again no poliomyelitis. 1 case of dysentery was notified. Three cases of food poisoning are reported - all cases were mild.

The respiratory infections, apart from tuberculosis, once the great killer and now largely controlled, still give considerable cause for disquiet and remain the commonest group of illnesses in the community. They are a cause of much ill health and in some finally of death. Influenza and bronchitis remain two most frequent causes of incapacity for work.

This year 3 people died from pneumonia, and 7 from bronchitis, while from tuberculosis there was only 1 death. There were 2 deaths from influenza.

I am glad to report an increase in diphtheria immunisation which shows a rise from 282 to 351. There is also an increase in the number who have received booster injections from 274 to 318. It is important to keep up the rate of acceptance of the Community to protection against this disease, and the public are

constantly being reminded of this necessity as if the number of susceptibles rises an outbreak could still occur. Diphtheria immunisation is now given in the form of a triple vaccination in conjunction with tetanus (lock jaw) and whooping cough. Once again large numbers have been immunised against poliomyelitis including 1178 receiving fourth injections of the Salk vaccine. I am also pleased to report an increase of the number of persons vaccinated against smallpox. The time for smallpox vaccination is in infancy, preferably between the fourth and fifth month of life, and not as a panic measure should an outbreak of smallpox occur. 118 infants have received a primary vaccination, compared with 51 last year.

Housing development continued in a satisfactory manner. Three pairs of old peoples bungalows were erected at Moulton during the year.

Private enterprise produced 52 houses (44 less than in 1960) making the total since the war 994. A further 96 houses were being erected at the end of 1961.

Improvement grants were made on 45 properties, as compared with 24 in 1960. During the year "Standard Grants" were made in respect of 22 properties.

In conclusion, thanks are expressed to all members of the staff who contributed in any way towards the compilation of this report, in particular, to those of the Public Health Department, also the Chairman and Members of the Public Health and Housing Committee for their interest and encouragement during the year under review. Appreciation is also expressed for the information on immunological measures supplied by the County Medical Officer of Health.

I have the honour to be,

Your obedient Servant,

JOAN M. ST. V. DAWKINS.

Medical Officer of Health.

# BRIXWORTH RURAL DISTRICT COUNCIL

## MEMBERS OF THE PUBLIC HEALTH COMMITTEE WHO SERVED DURING THE COURSE OF THE YEAR.

Mr. E.T. Gardner (Chairman)	Mr. J.R. Hart (Deputy Chairman)
Mr. O.E.P. Wyatt, M.C., J.P. (Chairman of the Council)	Alderman C.M. Newton, M.B.E. (Vice-Chairman of the Council)
Mr. P.L. Battle	Mr. J.H. Rishworth
Mr. E.P. Cowling	Mr. E.A. Turney
Mr. R.H. Dickins	Mr. R. Wallbank
Mrs. J.D.R. Lambley	Mr. J.G. Wearing
Mrs. W. Mahon	Mr. W.R.M. Webster
Mr. D.S. Mason	Mr. A.J. Williams
Mr. B.V. Morris	Mr. W. Wood
Mr. T.R. Pegram	



PUBLIC HEALTH OFFICERS OF THE LOCAL AUTHORITY.

Medical Officer of Health:

JOAN M. ST. V. DAWKINS, M.B., B.S., D.P.H., D.C.H.,

also holds appointments of

Medical Officer of Health, Daventry Rural District Council, Daventry Borough Council, Assistant County Medical Officer of Health, and School Medical Officer.

Senior Public Health Inspector:

F. A. RUSSELL, F.F.S., M.R.S.H., M.A.P.H.I.

Assistant Public Health Inspector:

R. S. LINLEY.

# SUMMARY OF VITAL STATISTICS.

Area (in acres)	...	82,944
Population	...	18,480
Number of separate dwellings	...	6,333
Rateable Value 1961	...	£249,253
Product of a Penny Rate	...	£1,005

<u>LIVE BIRTHS</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>	<u>Rate per 1000 estimated</u>	<u>Rate for Northamp-tonshire</u>	<u>Rate for England and Wales</u>
Legitimate	132	129	261			
Illegitimate	5	8	13			
	<u>137</u>	<u>137</u>	<u>274</u>	16.77	18.04	17.4

<u>STILL BIRTHS</u>				<u>Rate per 1000 Live and Still Births</u>		
Legitimate	1	3	4			
Illegitimate	2	-	2	21.90	16.22	18.7

<u>TOTAL LIVE AND STILL BIRTHS</u>			
Legitimate	133	132	265
Illegitimate	7	8	15

## INFANT DEATHS

Deaths under 1 year per 1000 live births.						
	<u>Male</u>	<u>Female</u>	<u>Total</u>	<u>Rate per 1000 Live Births</u>	<u>Rate for Northamp-tonshire</u>	<u>Rate for England and Wales</u>
Legitimate	4	-	4	14.59	17.61	21.4
Illegitimate	-	-	-	Nil		

## NEONATAL DEATHS

Legitimate	2	-	2	7.29	12.55	15.5
Illegitimate	-	-	-			

## DEATHS OF INFANTS UNDER ONE WEEK

Legitimate	2	-	2
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Illegitimate Live Births per cent of total live births - 4.74%

Maternal Mortality (including abortion) NIL

" " per 1000 live and stillbirths .55 .33

## DEATHS

	<u>Male</u>	<u>Female</u>	<u>Total</u>	<u>Rate per 1000 popu-lation</u>	<u>Rate for Northamp-tonshire</u>	<u>Rate for England and Wales</u>
	84	145	229	12.39	11.18	12

TABULATED SUMMARY FOR PREVIOUS YEARS

Year	Estimated Population	<u>Births</u>		<u>Deaths</u>			
		No.	Crude Rate	<u>Under 1 year</u>		<u>All Ages</u>	
				No.	Rate	No.	Crude Rate
1951	17730	291	16.41	9	30.93	191	10.72
1952	17840	263	14.78	6	22.81	156	8.74
1953	17990	267	14.88	11	41.19	235	13.06
1954	18300	266	14.51	4	15.03	257	14.04
1955	18440	276	14.96	5	18.11	270	14.64
1956	18620	260	13.96	6	23.08	220	11.82
1957	18860	262	13.89	7	26.72	240	12.72
1958	19170	303	15.80	5	15.10	226	11.80
1959	19270	283	14.94	3	10.4	214	11.11
1960	19470	310	15.92	2	6.45	229	11.76
1961	18480	274	16.77	8	14.59	229	12.39





## SECTION A.

### NATURAL AND SOCIAL CONDITIONS.

The Rural District is centrally situated in the County of Northamptonshire, extending in the south from the County Borough of Northampton to the Leicestershire border in the north. The character of the area is largely rural and the main industry is agriculture. A few light industries are scattered throughout the district. Open cast iron workings are present in the vicinity of Pitsford and Brixworth.

The district presents a picture of largely unspoilt rural country, with many woods, set in an undulating countryside enlivened by the stretches of water of the reservoirs, which are characteristic of the area.

POPULATION. The Registrar General gives the population for the mid-year 1961 as 18480, a decrease of 990 on the estimated population of the previous year. This figure is based on the 1961 census and is therefore accurate, and not estimated as previously. The natural increase in population, the excess of births over deaths was 45.

DEATHS. The total number of deaths assigned to the District for the year was 229, the same as in 1960. The crude death rate based on the mid-year population was 12.39 compared with 11.76 in the previous year. The following table has been compiled for comparison with the four previous years :-

<u>Years</u>	<u>Total</u>	<u>Male</u>	<u>Female</u>	<u>Recorded</u>
1957	240	88	152	12.72
1958	226	98	128	11.8
1959	214	93	116	11.11
1960	229	99	130	11.76
1961	229	84	145	12.39

In order to compare the mortality in the District with the mortality for England and Wales it is necessary to make a correction to allow for the difference in age and sex distribution of the two populations. This is done by applying to the crude death rate of the District an "Area Comparability Factor" which has been estimated by the Registrar General as .77 for this District. In addition the area comparability factors have been adjusted specifically to take account of the presence of any residential institutions in the area. There are a number of institutions in this area for old people and this adjustment is therefore very necessary in order to obtain a true picture of the area mortality.

The Standardised Death Rate, therefore, is 9.5 and well below the figure of 12 for England and Wales.



## Causes of Death.

The causes of death are shewn in the statistical table on page 12 and are classified under thirty six headings, based on the abbreviated list of the International, Statistical Classification of Diseases, Injuries and Causes of Death 1948, as used for England and Wales.

The vital statistics for the year show that there were 229 deaths, the same number as last year. This gives a standardised rate of 9.5 compared with the national figure of 12. Female deaths exceeded male deaths by 61. The great preponderance of deaths from diseases of the heart and circulation is once more evident, making a total of 142 of which 38 died from coronary disease alone, while 49 died from other heart disease, a further 38 from vascular lesions of the nervous system, and 17 from hypertension, and other circulatory diseases.

Disease of the heart and circulation constitute therefore more than one half of the total deaths. Cancer remains again the second cause of death, taking this year 25 persons, a decrease of 16 on last year. 2 died (both males) from cancer of the lung, a decrease of 9 on last year. Disease of the heart and circulation together with cancer cause in the district over 70% of the total deaths.

The trend of principal causes of death continues therefore towards the mainly degenerative and neoplastic conditions and away from infectious disease, now largely controlled by the wide number of antibiotic and other drugs. It must be remembered however that arterial disease may attack early, often in males in the prime of life, as evidenced by the mounting toll of deaths from coronary disease, and now each year deaths from cancer of the lung increases. At the time of writing, the Report of the Royal College of Physicians on Smoking and Cancer of the lung has been published. The evidence that heavy smoking of cigarettes and cancer of the lung are related is conclusive. In 1961 there were 22,809 deaths from lung cancer in England and Wales.

There is also an increase in male deaths between the ages of 15 and 24 almost entirely the result of motor vehicle accidents. As many die from accidents in the home as on the roads, mostly in the very young and the aged, nearly all of which could have been prevented.

The causes of arterial disease still elude us. The disease

is mainly one of degeneration, but this process may arise earlier in some than others. There may be a strong hereditary factor, but the decline of the taking of physical exercise due to the introduction of the internal combustion engine, the over civilisation of our diet, the increasing stress and frustration of modern life may all be factors in the early incidence of the disease in some. Man no longer labours to grow his own food, for many it comes too easily and in too great a quantity. It has been said that modern man may be "digging his own grave with his teeth".

The genesis of the neoplastic conditions remain also unsolved. Cancer education and the recognition of early symptoms with their prompt diagnosis and treatment may however save many lives.

The respiratory infections still take their toll, though less than formerly. The great majority of deaths from pneumonia are in those whose health is undermined by other causes and is as such only a terminal event.

# M O R T A L I T Y      T A B L E.

<u>Causes of Death</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
1. Tuberculosis, respiratory	-	-	-
2. Tuberculosis, other	-	1	1
3. Syphilitic disease	-	-	-
4. Diphtheria ..	-	-	-
5. Whooping Cough	-	-	-
6. Meningococcal infections	-	-	-
7. Acute poliomyelitis	-	-	-
8. Measles ..	-	-	-
9. Other infective and parasitic diseases ..	-	1	1
10. Malignant neoplasm, stomach	-	5	5
11. Malignant neoplasm, lungs, bronchus ..	2	-	2
12. Malignant neoplasm, breast	-	4	4
13. Malignant neoplasm, uterus	-	-	-
14. Other malignant and lymphatic neoplasms ..	6	8	14
15. Leukaemia, aleukaemia	1	1	2
16. Diabetes ..	1	3	4
17. Vascular lesions of nervous system ..	10	28	38
18. Coronary disease, angina	17	21	38
19. Hypertension with heart disease	1	1	2
20. Other heart disease	12	37	49
21. Other circulatory disease	5	10	15
22. Influenza ..	2	-	2
23. Pneumonia ..	-	3	3
24. Bronchitis ..	6	1	7
25. Other diseases of respiratory system ..	1	-	1
26. Ulcer of stomach and duodenum	-	-	-
27. Gastritis, enteritis and diarrhoea ..	1	4	5
28. Nephritis and nephrosis	1	-	1
29. Hyperplasia of prostate	2	-	2
30. Pregnancy, childbirth, abortion	-	-	-
31. Congenital malformations	1	2	3
32. Other defined and ill-defined diseases ..	11	11	22
33. Motor vehicle accidents	2	-	2
34. All other accidents	2	3	5
35. Suicide ..	-	1	1
36. Homicide and operations of war	-	-	-
	<u>84</u>	<u>145</u>	<u>229</u>



Associated Mortality Statistics:-

	<u>Male</u>	<u>Female</u>	<u>Total</u>
STILL BIRTHS ..	3	3	6
DEATHS of infants under 1 year	4	-	4
DEATHS of infants under 4 weeks (included in previous figure)	2	-	2

BIRTHS. The number of live births was 274, compared with 310 in 1960. The rate per thousand of the population was 16.77. Applying the Registrar General's Area Comparability Factor for births (1.04) to this figure the Standardized Birth Rate obtained for this district - 17.44 compared with 17.4 for England and Wales.

STILL BIRTHS. The number of still births during 1961 was 6 (3 males and 3 females). The resultant rate for the district is 21.90 which is more than the rate of 18.7 for England and Wales. The rates for the past five years are given in the following table (per 1,000 live and still births) by way of comparison.

STILL BIRTH RATE.

<u>1957</u>	<u>1958</u>	<u>1959</u>	<u>1960</u>	<u>1961</u>
30.55	13.08	13.7	12.90	21.90

ILLEGITIMATE BIRTHS. There were 15 illegitimate births assigned to the district during the year (7 males and 8 females), compared with 11 in 1960. Shown as a proportion of the total number of live births this represents 5.47 per cent.

MATERNAL MORTALITY. No deaths associated with pregnancy or childbirth were recorded during the year.

INFANT MORTALITY. The number of infants who died before reaching their first birthday was 4 (4 males), two more than in 1960. The resultant rate of 14.59 compares favourably with 21.4 for England and Wales.

DEATH RATE UNDER 1 YEAR PER 1,000 LIVE BIRTHS.

<u>1957</u>	<u>1958</u>	<u>1959</u>	<u>1960</u>	<u>1961</u>
26.72	15.1	10.4	6.45	14.59

NEONATAL DEATH RATE. The number of infants who failed to survive for 4 weeks after birth were 2 (both males). This gives a rate per 1,000 live births of 7.29 or 0.72 per cent. This is very much lower than the rate of 15.5 for England and Wales.

The Registrar General gives a further sub-division, in his returns this year, of deaths of infants under one week of age. There were no deaths in this group.

These deaths are included in the Infant Mortality Rate.

TABLE OF CAUSES OF INFANT DEATHS.

	<u>Neonatal.</u>	<u>1 - 12</u> <u>months.</u>
Prematurity Cerebral haemorrhage (Face to pubis delivery)	1	
Prematurity (Premature rupture of membranes)	1	
Congenital 1. Heart Disease (Tetralogy of Fallot) 2. Internal Hydrocephalus		1
Acute Pneumonia Right Mastoiditis Acute upper respiratory infection (4 months)		1



GENERAL PROVISION OF HEALTH AND WELFARE SERVICES.

LABORATORY SERVICE. Laboratory work in connection with the diagnosis and control of infectious diseases is carried out at the Emergency Public Health Laboratory in Northampton under Dr. Hoyle, and is free of cost to the Local Authority. An efficient and helpful service is always provided, and we thank Dr. Hoyle for constant co-operation.

INFANT WELFARE CENTRES. The following centres are held at the places and dates indicated. Your Medical Officer of Health is in attendance in her capacity as Assistant County Medical Officer.

BRIXWORTH INFANT WELFARE -

3rd. Friday each month at Village Hall.

WELFORD INFANT WELFARE -

4th Thursday each month at Village Hall.

BOUGHTON INFANT WELFARE -

2nd Wednesday each month at Boughton Institute.

MOULTON INFANT WELFARE -

1st Tuesday each month at Manfield Hall.

SPRATTON INFANT WELFARE -

4th Tuesday each month at Women's Institute.

AMBULANCE SERVICE.

General medical and surgical cases are removed by the County Ambulance Service, under the control of the County Council. Infectious diseases cases are also removed under the same arrangements.

NURSING IN THE HOME. The Services of District Nurses, Mid-wives and Health Visitors are provided by the County Council, and the area is well covered. The Home Help Service is also provided by the County Council and is usually made through the direction and recommendation of the District Nurse. This is a very necessary service, and affords considerable benefit to the Community both for domiciliary maternity cases and particularly in this area in the care of old people, who can remain comfortably at home, and who, without this help would be in Institutions.

GENERAL HOSPITAL ACCOMMODATION. The Oxford Regional Hospital Board is responsible for the provision of hospitals and out patient clinics.

All medical, surgical and paediatric and gynaecological cases are treated at Northampton General Hospital.

Maternity cases are treated at the Barratt Hospital, which forms part of the General Hospital.

Accident and orthopaedic cases are treated at the General Hospital, and the latter also at the Manfield Hospital, Northampton.

Two Geriatric Units for old ladies are situated at Pitsford within this district.

ISOLATION HOSPITAL. Cases of Infectious Disease which require isolation are treated at the Harbrough Road Isolation Hospital, Northampton, which comes under the administration of the Oxford Regional Hospital Board. Cases of tuberculosis are treated at Creaton Hospital.

WELFARE OF OLD PEOPLE. National Assistance Act, 1948. section 47 and National Assistance (Amendment) Act, 1951.

Under this section the Council is responsible for the removal to suitable premises of persons needing care and attention. No action was necessary, under this Act, this year, though a number of old people were kept under supervision, and arrangements made for them to enter Institutions, or to be looked after by other means. We are fortunate in this district in having two comfortable country houses at Pitsford as hospitals for old ladies. We have no accommodation in the district for males who have either to go to St. Edmunds Hospital, Northampton, or to Danetre Hospital, Daventry.

### SERVICES FOR OLD PEOPLE.

The following provide services for old people :-

#### 1. The National Health Service.

(a) General Practitioner Service.

(b) Hospital and Specialist Services including the Almoner Service, in this district there are two geriatric hospitals for old ladies at Pitsford.

#### 2. The County Council.

(a) The Health Department.

1. District Nurses.
2. Health Visitors.
3. Home Helps.
4. Chiropody Service.
5. Certain home equipment where necessary.



(b) The Welfare Department.

1. Part III accommodation and homes. There are none in this District.
2. Special services for blind etc., and home fittings where necessary.

3. The National Assistance Board.

Financial help where necessary.

4. The District Council.

Homes for the aged, flats and in some cases flatlets with warden supervision.

5. Voluntary Organisations.

These are many and services vary in different areas. They include holiday schemes in which old people are taken on seaside holidays in off season times. The Darby and Joan Clubs, "Meals on Wheels" Service, and Home Visiting. The Womens Voluntary Service very often undertake many of the above duties, while in other areas local voluntary Committees run the various organisations. The Rural Communities Council together with the Old Peoples Welfare Committee provide co-operation between the various services.

Your Medical Officer of Health having a special interest in the welfare of the aged and by virtue of her appointment both to the District and the County Council and by her relationship with other Medical colleagues endeavours to fulfil the function of co-operation and co-ordination between these many agencies. Many cases of breakdown can be prevented by early application of these services.

Voluntary organisations have also requested that your Medical Officer should give lectures and talks and each invitation is accepted and fulfilled.

6. Darby and Joan Clubs.

The following report has been received from the Walgrave Club. The report was kindly supplied by Mrs. Barbara Knight of Walgrave.

"The Club was started in March 1960 and soon there were 50 members. This number has been very constant, as one or two members have died, new ones have joined. The majority come from Walgrave, but there are nine from Old and two from Hannington. Members are admitted at the age of 60 but we do not ask for birth certificates and I believe "

"one member was only 58 when she first came.

The Club meets every Monday (except Bank Holidays) from 2 p.m. to 4 p.m. The members play cards, Whist, Bridge and even Old Maid, for the first part of the afternoon. This is followed by a short session of Bingo, the winner receiving a small prize, usually eggs, fruit or cream. Tea is then served by the helpers, followed by a raffle, the members bringing small prizes. Notices and Birthday Honours follow. Birthday cards are sent to all members.

Outings are arranged, usually one whole day out and later an evening tour, also to the Christmas pantomime. At Christmas there is a party with an entertainment and the people of the village have been very kind in giving for the party. We also celebrate the Club birthday with a small party. We are lucky in having some very good helpers and everyone has been most kind to the Club."

## SECTION C.

### SANITARY CIRCUMSTANCES OF THE DISTRICT.

#### WATER SUPPLIES.

All responsibility for water undertaking throughout the entire Rural District is now vested in the Mid-Northamptonshire Water Board. The source of supply for the Board is Pitsford Reservoir which has a capacity of about 4,000 million gallons. Treatment of water consists of softening, filtration and finally chlorination. There is no plumbo solvency.

The following figures are supplied by the Mid-Northamptonshire Water Board :-

Bacteriological samples taken in Brixworth	
Rural District ..	62
Chemical analyses at Treatment Works	36
Bacteriological samples taken at	
Treatment Works ..	724

Unfortunately no figures are readily available for the number of houses supplied (a) direct from the mains, and (b) by standpipes.

#### PRIVATE SUPPLIES.

3 samples were taken during the year and submitted for analysis, and two unsatisfactory supplies were found. One was rectified.

#### SEWERAGE AND SEWAGE DISPOSAL.

Twenty six schemes have now been completed. A new scheme for Brixworth was commenced during the year, and another for Creaton and Cottesbrooke will soon be starting.

It is pleasing to be able to record such a record of progress, one which it is very doubtful if any other Authority can better or even equal.

DISINFECTION. Concurrent and terminal disinfection by means of gaseous liquid disinfectants is carried out in homes where certain infectious diseases are notified. In the course of the year a number of requests for disinfection of premises were received and dealt with.

DISINFESTATION. This service is carried out on behalf of the Council at the request of owners or tenants of houses complaining of the presence of vermin. No such action was necessary during 1961. (This includes the eradication of bed bugs).



PREVENTION OF DAMAGE BY PESTS ACT, 1949.

During the year the existing staff proved adequate to discharge the Council's responsibilities under the Act; no major rat infestations occurred on the Council's properties throughout the period under review. Refuse tips are treated regularly throughout the year.

MOVEABLE DWELLINGS - PUBLIC HEALTH ACT, 1936. SECTION 26. AND  
THE CARAVAN SITES AND CONTROL OF DEVELOPMENT ACT, 1960.

One licence was granted by the Council during the year.

SCAVENGING. Refuse has been collected weekly throughout the District since April, 1960.

## SECTION D.

### H O U S I N G .

#### Housing Act, 1957.

No. of permanent dwellings in area	6333
Estimated number of houses unfit for human habitation according to Sec.16 of the Act and suitable for action under Secs.17 & 42 of the Housing Act 1957 ..	297
No. of houses for inclusion in Clearance Areas ..	179
No. of houses already covered by Clearance Orders ..	3
No. of houses for individual demolition	115

It is of interest to note that, for the purposes of the report, the total number of unfit houses revealed by the original survey, plus subsequent additions is 940 but by the time the report had been prepared 290 of these had been sufficiently improved to merit upgrading, whilst a further 353 had been demolished.

The usual work of the Council under the Housing and Public Health Acts continued, and the details are set out in tabular form below and on page 41.

#### Housing Act, 1957. Section 17.

1. No. of unfit houses represented	3
2. No. of Demolition Orders made	3
3. No. of houses demolished	14
4. No. of persons affected ..	1

#### Housing Act, 1957. Section 42.

1. No. of Clearance Orders made	Nil
2. No. of houses included in Area	Nil
3. No. of houses demolished	Nil
4. No. of persons affected	Nil

#### Other associated housing statistics.

1. No. of undertakings received	9
2. No. of unfit houses upgraded	7

From these details it will be observed that the total number of unfit houses throughout the district declined by 9 during the year, either through improvements or demolition, whilst a further 9 came under control by means of undertakings from the respective owners not to re-let after vacation until made fit for human habitation.

These figures taken by themselves would perhaps show little progress in Slum Clearance during the year under review, but as the Slum Clearance problem in the Brixworth Rural District had largely been dealt with at the time of writing my last report, this is to be expected. To bring progress into true perspective therefore, a summary of the position at the end of the year under review is appended below. This shows only 28 houses to be dealt with which must compare favourably with any District in the Country.

No. dealt with by Undertakings	229
No. dealt with by Demolition Order or Clearance Order	393
No. repaired by owners and up- graded ..	290
No. remaining to be dealt with	28

At the same time it must, however, be remembered that a considerable number of substandard houses are still occupied by single elderly persons and old couples. Though these may be adequate yet for sometime a re-survey of these properties should soon be made in order to determine the extent to which they may have deteriorated since the initial survey; such a survey may well reveal a need for the erection of a few more Old Persons dwellings. At the moment the Council has no new houses in course of construction, the six old peoples' bungalows at Moulton having been completed towards the end of the year.

The Council have always encouraged private owners to take advantage of the financial aid available by way of Discretionary and Standard Grants to improve their properties. I do not think that this report would be complete without summarising the position to date, which is as follows:

340 properties have been brought up to modern standards by the provision of Discretionary Grants amounting in total to £18,108. The most significant thing about this, however, is that 73 of the 340 referred to were substandard and as a result of the improvements, costing £16,756, they have been upgraded

and their useful life prolonged for many years. It is fairly certain that had these 73 properties not been upgraded with the assistance of grants they would have had to have been demolished, so that it may be said that for an investment of a little under £17,000 the Council have been saved the provision of some 70 new houses which would cost in the region of £100,000.

55 Standard Grants have been approved to date, of which 46 have been completed and grant aided to a total cost of £3,061.





## SECTION E.

### INSPECTION AND SUPERVISION OF FOOD.

#### THE MILK AND DAIRIES (GENERAL) REGULATIONS, 1959.

The above Regulations made jointly by the Minister of Agriculture, Fisheries and Food and the Minister of Health, came into operation on 8th March, 1959, and brought earlier regulations into line with modern methods of milk production. They simplified much of the existing procedure, making it easier for milk to be produced, handled and distributed under up to date hygienic conditions.

The enforcement of the Regulations is the responsibility of the Minister of Agriculture, Fisheries and Food and (as regards milk distribution and infected milk) by the Local Authority.

On November 25th, 1957, the Rural District became a Specified Area for the sale of milk, as a result of which no milk which has not been tuberculin tested, pasteurised or sterilized may be sold in the area.

#### FOOD AND DRUGS ACT, 1939 - CLEAN FOOD.

DAIRIES. There are three registered dairies in the District, and during the year a satisfactory standard of cleanliness was maintained therein.

FOOD PREMISES. There are 87 food premises in the District, the total number being made up as follows:- 66 shops, 3 cafes, 13 butchers shops and 5 bakeries.

CONDEMNED FOOD. Condermed food is disposed of in one of two ways, i.e. tinned food is buried at one of the Council's refuse tips, and unsound meat is sent to The Pytchley Hunt Kennels.

ICE CREAM. Most retailers are still selling pre-packed varieties only, but with the introduction of the Food Hygiene Regulations 1955, it is now possible to register premises for the sale of both completely wrapped and partly wrapped products.

#### FOOD HYGIENE REGULATIONS, 1955.

During the year efforts have been made to improve further the general standard of Food Hygiene throughout the District. In spite of the difficulties involved it can fairly be stated

that the majority of food traders are endeavouring to attain satisfactory standards. 72 visits were paid to food premises under the Food Hygiene Regulations.

Samples taken in the Brixworth Rural District during the year, 1961, by the County Council.

Milk ..	84	Brought forward	107
Cream ..	3	Lard ..	1
Butter ..	2	Pastes ..	2
Cheese ..	1	Fish Cakes ..	1
Spirits ..	3	Sausages ..	2
Ice Cream ..	3	Medicines ..	3
Margarine ..	2	Tea and Coffee	2
Soft drinks	2		
Jams and marmalade	4		
Evaporated milk	3		
	<u>      </u>		<u>      </u>
Carried forward	107	TOTAL	118
	<u>      </u>		<u>      </u>

Remarks.

Six samples of milk taken from producer-retailers were found to be below standard in fat. In each case appeal samples or follow-up samples showed the milk produced by the herds to be genuinely of poor quality. The producers were advised to get in touch with the Milk Advisory Officer.

One sample of milk was reported to contain at least 17.5% of added water. This sample was from a pint bottle purchased from one of the larger dairy companies. In the legal proceedings which followed the Company pleaded guilty and said that they had no previous convictions for this kind of offence. They were fined £5. with £2. 2. 0d. costs.

The remaining samples were completely satisfactory.

SALE OF FOOD (WEIGHTS AND MEASURES) ACT, 1926. LABELLING OF FOOD ORDER, 1953.

3,027 articles of food were checked for weight or measure, almost the same number as last year. 15 articles were found to have slight deficiencies. No special action was called for.

## SLAUGHTERHOUSES.

At the beginning of the year five slaughterhouses were licensed, but only one was re-licensed during the year, as the other four failed to comply with the Slaughterhouses (Hygiene) Regulations, 1958, and the Slaughter of Animals (Prevention of Cruelty) Regulations, 1958, and were closed with effect from 30th September, 1961.

It would now appear that only two more slaughterhouses within the District will be brought up to the standards prescribed in the above Regulations.



## MEAT INSPECTION.

Inspection of meat was maintained at 100%, and findings are recorded below in a table based on that suggested by the Ministry of Health.

### Carcases and Offal inspected and condemned in whole or in part.

	Cattle	Calves	Sheep and Lambs	Pigs
Number killed (if known)	246	2	2791	46
Number inspected	246	2	2791	46
<u>All diseases except Tuberculosis and Cysticerci.</u>				
Whole carcasses condemned	Nil	Nil	Nil	Nil
Carcases of which some part or organ was condemned	27	Nil	Nil	Nil
Percentage of the number inspected affected with disease other than tubercu- losis and cysticerci	10.57	Nil	Nil	Nil
<u>Tuberculosis only.</u>				
Whole carcasses condemned	Nil	Nil	Nil	Nil
Carcases of which some part or organ was condemned	5	Nil	Nil	Nil
Percentage of the number inspected affected with tuberculosis	2.03	Nil	Nil	Nil
<u>Cysticercosis.</u>				
Carcases of which part or organ was condemned	Nil	Nil	Nil	Nil
Carcases submitted to treat- ment by refrigeration	Nil	Nil	Nil	Nil
Generalised and totally condemned ..	Nil	Nil	Nil	Nil



## SECTION F.

### PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

There was a very considerable increase in the notification of infectious diseases. This was due to the increase of measles notifications from 13 last year to 432 this year, and which continues to show its biennial incidence.

MEASLES. Notifications rose to 432. The outbreak occurred mainly in the spring.

This disease though highly infectious is now, like scarlet fever, of a more benign character, seldom showing serious complications. However, in the more delicate, and occasionally in normal children infectious ears or eyes or pneumonia still occur. These are, however, usually soon and successfully dealt with by the large number of effective antibiotics that are now available.

SCARLET FEVER. 5 cases were notified. This disease continues in its mild phase. Its principle interest is that it gives a rough indication of the amount of streptococcal infection in the community.

WHOOPIING COUGH. No cases were notified. This is another condition which is becoming largely more benign, and the number of cases are declining. To young infants, however, whooping cough can be a serious and distressing illness, and the policy of many practitioners and the County Council in promoting early immunization to this condition, will, it is hoped, prevent early onset and cause an ultimate decline in incidence.

DYSENTERY. One case of Sonne was notified. This was mild and without complications. It is gratifying to record only this single case in this District during the year.

POLIOMYELITIS. Once again the District had no cases. The immunisation of large numbers continued throughout the County and a total of 792 were immunized, with a further 932 receiving their third injection and 1178 their fourth injection. It is hoped that a marked decline in the incidence may follow.

FOOD POISONING. Two cases resulted from an infection, the source of which was not specifically traced, but contaminated milk was suspected. The patients were two sisters who had been drinking untreated milk from cows kept to supply their personal needs. The milk was found to contain B. Coli. The family were most

anxious to prevent any further illness, and a satisfactory system of hygiene was instituted.

The third case was in a man following attendance at a public dinner. Again the source of infection was not proved, as no food remained after the dinner. Contaminated fish was suspected, and a number of investigations, both in the caterer's premises and the fishmonger's were done. Nothing was proved. The patient made an uneventful recovery and there were no further cases. Both the caterer and the fishmonger were very co-operative and the opportunity for careful instruction in personal hygiene and that of the premises was taken.

TYPHOID FEVER. No cases occurred.

DIPHTHERIA. There were no cases.

PNEUMONIA. 11 cases were notified and there were 3 deaths. Respiratory infection continues to be a cause of much ill health and chronic suffering. A very marked decline in deaths from pneumonia has taken place since the discovery of the sulphonamides and antibiotics, however, in chronic sufferers from bronchitis and in the aged and debilitated, some cases do still prove fatal.

The incidence of chronic nasal catarrh often with the later development of sinusitis is still an all too common occurrence. Many schoolchildren still suffer from nasal catarrh. The cause is obscure and the need for research into this problem continues to be stressed.

MENINGOCOCCAL MENINGITIS. No cases occurred.

SMALLPOX. Once again no cases were notified this year.

Notification of the following cases of infectious disease was received during the year.

DISEASE	M.	F.	Total.	Rate per 1,000 population
Acute Primary Pneumonia	5	6	11	0.59
Whooping Cough	-	-	-	-
Measles ..	219	213	432	23.38
Scarlet Fever ..	2	3	5	0.27
Food Poisoning ..	1	2	3	0.16
Erysipelas ..	-	1	1	0.05
Dysentery ..	1	-	1	0.05
Total	228	225	453	



## VACCINATION AND IMMUNISATION.

### DIPHTHERIA IMMUNISATION.

I am once again pleased to report an increase in the number of children immunised to diphtheria. This I was able to do last year, and to be able to report a further higher figure is very satisfactory. More children have also received booster immunisation. Every child entering school for the first time is medically examined and at this inspection booster immunisation is offered and where needed is performed. Few parents fail to respond to the offer.

It is only by keeping up the numbers of children actively immunised that diphtheria is kept in check. Any slackening of response, with the consequent rise in the number of susceptibles in the community can result in an outbreak of the disease. The exhortation of the public and stimulation of response to the continued necessity for active immunisation remains a constant and recurring endeavour of all those engaged in the prevention of disease.

### SMALLPOX VACCINATION.

The number vaccinated against smallpox shows, this year, an increase from 215 to 264. This is pleasing to report. It is hoped that all infants under one year will receive smallpox as well as other vaccinations. My warning in my report last year has unfortunately been shown this year to have been a timely one. The recent outbreak of smallpox in various parts of the country, though fortunately not in this county, emphasises the necessity for smallpox vaccination, not as a panic measure in times of infection, but as a routine in infancy, when it is considered that complications to vaccinations are minimal. It is hoped that the parents of all young children will remember the recent outbreak, and they will arrange for vaccination preferably between four and eighteen months of age.

### POLIOMYELITIS.

The numbers vaccinated against poliomyelitis continues to be high, though not as high as previously, when poliomyelitis vaccination was first introduced and whole communities were immunised. A large number have also received fourth injections of Salk vaccine.

## WHOOPING COUGH AND TETANUS.

Immunisation against the above diseases is carried out in conjunction with diphtheria as a triple antigen. Immunisation is started at two months in order to prevent whooping cough, a distressing and often disabling illness when occurring in infancy.

## TUBERCULOSIS.

No action was found to be necessary under the Public Health (Prevention of Tuberculosis) Regulations, 1925, in connection with persons suffering from pulmonary tuberculosis employed in the milk trade, or under Section 172 of the Public Health Act, 1936, which deals with the compulsory removal to hospital of persons suffering from tuberculosis.



### SMALLPOX VACCINATION.

	<u>Under 1.</u>	<u>1.</u>	<u>2 - 4.</u>	<u>5 - 14.</u>	<u>15 or over.</u>	<u>Total.</u>
Primary	118	41	21	12	19	211
Re-vaccination	-	-	2	9	42	53

### POLIOMYELITIS VACCINATION.

<u>Under 1.</u>	<u>1.</u>	<u>2.</u>	<u>3.</u>	<u>4.</u>	<u>5-9.</u>	<u>10-14.</u>	<u>Total.</u>	<u>15 and over.</u>	<u>Third inj's.</u>	<u>Fourth inj's.</u>
18	123	26	14	9	75	63	328	467	932	1178

### DIPHTHERIA IMMUNISATION.

	<u>Under 1.</u>	<u>1.</u>	<u>2.</u>	<u>3.</u>	<u>4.</u>	<u>5-9.</u>	<u>10-14.</u>	<u>Total.</u>	<u>Booster.</u>
Diphtheria Immunisation	3	-	3	2	2	8	5	23	215
Combined Diphtheria/Whooping Cough	5	2	2	-	-	1	-	10	18
Triple Total	236	18	17	11	6	20	10	318	85
Diphtheria Immunisations	244	20	22	13	8	29	15	351	318
Whooping Cough only	1	-	-	-	-	-	-	1	-

### Number of Children who have completed a full Course of Diphtheria Immunisation.

Age at 31.12.61. i.e. Born in year.	<u>Under 1.</u> 1961	<u>1.</u> 1960	<u>2.</u> 1959	<u>3.</u> 1958	<u>4.</u> 1957	<u>5-9</u> 1952- 1956	<u>10-14</u> 1947- 1951	<u>Total</u> under 15
Number Immunised	102	250	222	245	225	1180	1192	3416

# T U B E R C U L O S I S .

## AGE AND SEX DISTRIBUTION OF NEW CASES AND DEATHS, 1961.

Age Groups			New Cases				Deaths			
			Pulmonary		Other		Pulmonary		Other	
			M	F	M	F	M	F	M	F
0 -	..		-	-	-	-	-	-	-	-
1 -	..		1	1	-	-	-	-	-	-
5 -	..		-	-	-	-	-	-	-	-
15 -	..		-	-	-	-	-	-	-	-
20 -	..		-	-	-	-	-	-	-	-
25 -	..		1	1	-	-	-	-	-	-
35 -	..		-	-	-	-	-	-	-	-
45 -	..		-	-	-	-	-	-	-	-
55 -	..		-	-	-	-	-	-	-	-
65 and over			-	1	-	-	-	-	-	-
Age unknown			1	-	-	-	-	-	-	-
Total			3	3	-	-	-	-	-	-

MASS RADIOGRAPHY SERVICE  
No.1 Unit, Oxford Regional Hospital Board.

22nd June, 1961.

Institute of Agriculture, Moulton.

<u>Summary of Work</u>		<u>Male</u>	<u>Female</u>	<u>Total</u>
No. of miniature films taken	..	49	24	73
No. recalled for large films	..	-	-	-
No. recalled for clinical examination		-	-	-
No. referred to chest clinic	..	-	-	-
No. previously examined by M.M.R.		30	13	43
No. not previously examined by M.M.R.		19	11	30

Results of cases referred to Chest Clinic.

Carcinomatosis	..	-	-	-
Sarcoidosis	..	-	-	-

Results of cases clinically examined by the  
Medical Director but not referred to Chest Clinic.

Mitral disease	..	-	-	-
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Summary of newly discovered significant  
cases of tuberculosis.

<u>Group</u>	<u>No. examined</u>	<u>Active P.T.</u>	<u>Rate per thousand</u>	<u>Inactive P.T.</u>	<u>Rate per thousand</u>
Moulton	-	-	-	-	-

Thanks are expressed to the Director of the Mass Radiography Unit for supplying these figures.





S E C T I O N    G.

F A C T O R I E S    A C T,    1937.

PRESCRIBED PARTICULARS ON THE ADMINISTRATION OF  
THE FACTORIES ACT, 1937, FOR THE YEAR 1961.

CLASSIFIED LIST OF REGISTERED FACTORIES  
AS AT 31ST DECEMBER, 1961.

		Power	Non- Power
1.	Food manufacture	8	-
2.	Wearing Apparel :-		
	(a) Boots and Shoes	1	-
	(b) Outfitting	1	-
3.	Carpentry, Joinery & Sawmills	10	5
4.	Garages, Repair Shops & Engineers ..	11	5
5.	Laundries ..	3	-
6.	Plumbers ..	-	2
TOTAL		34	12

PART I OF THE ACT.

1. INSPECTIONS FOR PURPOSES OF PROVISIONS AS TO HEALTH.

Premises	No. on Register	Number of		
		Inspections	Written Notices	Occupiers Prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	13	36	-	-
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	34	12	-	-
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	-	-	-	-
	47	48	-	-

2. CASES IN WHICH DEFECTS WERE FOUND.

Particulars	No. of cases in which defects were found				No. of cases in which prosecutions were instituted
	Found	Remedied	Referred to H.M. Inspec.	Referred by H.M. Inspec.	
Want of Cleanliness (S.1)	-	-	-	-	-
Overcrowding (S.2)	-	-	-	-	-
Unreasonable temperature (S.3)	-	-	-	-	-
Inadequate ventilation (S.4)	-	-	-	-	-
Ineffective drainage of floors (S.6)	-	-	-	-	-
Sanitary conveniences (S.7)					
(a) Insufficient	-	-	-	-	-
(b) Unsuitable or defective	-	-	-	-	-
(c) Not separate for sexes	-	-	-	-	-
Other offences against the Act (not including offences relating to Outwork)	-	-	-	-	-
TOTAL	-	-	-	-	-

PART VIII OF THE ACT - OUTWORK.

Nature of Work	Section 110				Section 111	
	No. of out-workers in August list required by Sec. 110(i) (c)	No. of cases of default in sending list to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in un-wholesome premises	Notices served	Prosecutions
Making Wearing Apparel	10	-	-	-	-	-
TOTAL	10	-	-	-	-	-



SUMMARY OF  
PUBLIC HEALTH INSPECTOR'S INSPECTIONS.

Housing	...	1470
Slaughterhouses and Butchers Shops		291
Bakehouses	...	15
Cafes	...	3
Shops	...	54
Factories and Workshops		48
Water Supplies	...	16
Infectious Diseases	...	5
Defective Premises	...	134
Defective Drainage	...	40
Pests Destruction	...	86
Tents, Vans and Sheds		61
Dairies	...	4
Verrminous Premises	...	3
		<hr/>
		2,230
		<hr/> <hr/>

NOTICES SERVED :-

Informal	- Section 92 Public Health Act, 1936	7
Statutory	-do-	Nil





